

CITY OF TUCSON January 29, 2015

FIRE DEPARTMENT

JIM CRITCHLEY FIRE CHIEF

Mr. Aaron Sams Arizona Department of Health Services Bureau of Emergency Medical Services & Trauma System 150 North 18th Avenue, Suite 540 Phoenix, AZ 85007-3248

Dear Mr. Sams:

Enclosed you will find the City of Tucson Fire Department's completed annual Ambulance Revenue and Cost Report for the period of July 1, 2013, through June 30, 2014. Thank you for approving the February 2, 2015 extension for our submission.

If you have any questions, please contact Stacie Bird, Finance Manager, at 520-837-7385.

Sincerely,

Jim Critchley

Fire Chief

Enclosure

RECEIVED

FEB 3 2015

BEMSTS/CON & RATES

LONG REPORT - completed annually by: For-Profit Companies and Larger Ambulance Organizations - completed by all applicants for a General Rate Increase

ACTUAL FINANCIAL DATA

AMBULANCE REVENUE and COST REPORT

GENERAL INFORMATION and CERTIFICATION

Legal Name of Company:	CITY OF TUCSON			CON No.	108
D.B.A. (Doing Business As):	TUCSON FIRE DEPARTMENT	Business Phone:	520-791-4512	-	
Financial Records Address:	255 W. Alameda	. City:	Tucson	_Zip Code:	85701
Mailing Address (If Different):	P.O. Box 27210	City:	Tucson	_Zip Code:	85726
Owner / Manager:	Martha Durkin, Interim City Manager	ş.			
Report Contact Person:	Stacle Bird	Business Phone:	520-791-4512	Ext.	
Report for Period From:	From: July 1, 2013	То:	June 30, 2014		
Method of Valuing Inventory:	LIFO: Other (Explain):	No invento	ry maintained.	_	
Please attach a list of all affil	liated organizations (parents/subsidiaries) that exhibit at le	ast 5% ownership/\	resting.		
I hereby verify that I have directed	d the preparation of the enclosed annual report in accordance with th	e reporting requiremen	nts of the State of Arizon	a.	
I have read this report and hereby	y verify that the information provided is true and correct to the best of	my knowledge.			
This report has been prepared us	sing the accrual basis of accounting.				
Authorized Signature:	Kanle			_	
Title:	Assistant City Manager/Chief Financial Officer	Date	1-20-15	-	
Mail to: 06/22/2004 Formula's Excluded	Department of Health Services Bureau of Emergency Medical Services Certificate of Necessity and Rates Section 150 North 18th Avenue, Suite 540 Phoenix, AZ 85007-3248 Telephone: (602) 364-3150 Fax: (602) 364-3567				



MBULANCE SERVICE ENTITY:		TUCSON FIRE	DEPARTMENT	····
OR THE PERIOD FROM:	July 1, 2013	TO:	June 30, 2014	
TATISTICAL SUPPORT DATA	(1) SUBSCRIPTION SERVICE	(2)** TRANSPORTS UNDER	(3) TRANSPORTS NOT UNDER	(4)
ne <u>o. </u>	TRANSPORTS	CONTRACT	CONTRACT	TOTALS
Number of ALS Billable Transports:	-		17,683	17,683
Number of BLS Billable Transports:				
Number of Loaded Billable Miles:		<u></u>	69,195	69,195
Waiting Time (Hr. & Min.):				
Canceled (Non-Billable) Runs:			22,645	22,645 Number
Volunteer Services: (OPTIONAL)				Donated Hours
3 Paramedic and IEMT				7507-1
Emergency Medical Technician - B				
Other Ambulance Attendants	,	****************************		
9 Total Volunteer Hours	***************************************			

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contract runs.



1BU	LANCE SERVICE ENTITY:	TUCSON FIRE DEPARTMENT					
R TH	IE PERIOD FROM:	ERIOD FROM: July 1, 2013 TO:					
ATIS	TICAL SUPPORT DATA	(1)	(2)	(3)			
		SUBSIDIZED	NON- SUBSIDIZED	,,			
Line <u>No.</u>	Type of Service	PATIENTS	<u>PATIENTS</u>	<u>TOTALS</u>			
1	Number of ALS Billable Transports:		17,683	17,683			
2	Number of BLS Billable Transports:		<u> </u>				
3	Number of Loaded Billable Miles:		69,195	69,195			
4	Waiting Time (Hr. & Min.):						
5	Canceled (Non-Billable) Runs:	22,645		22,645 Number			
	Volunteer Services: (OPTIONA	AL)		Donated Hours			
6	Paramedic and IEMT						
7	Emergency Medical Technician - B	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u></u>			
8	Other Ambulance Attendants						
9	Total Volunteer Hours	· · · · · · · · · · · · · · · · · · ·					

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ΔMRIII	LANCE SERVICE ENTITY:			TUCSON FIRE	DEPARTMENT	
	IE PERIOD	FROM:	July 1, 201		June 30, 2014	
STATE	MENT OF INCOME					
Line						
No.	DESCRIPTION		<u>FROM</u>			
	Operating Revenues:					
1	Ambulance Service Routine Operating F	Revenue	Page 3, Line 10 & Pa	age 3.1, Line 10		\$ 21,798,550
	<u>Less:</u>		Dana 2 1 Lino 11		1,573,473	
2	AHCCCS Seltlement	***************************************	Page 3.1, Line 11	***************************************	2,784,072	
3	Medicare Settlement		Page 3.1, Line 12		-	
4	Contractual Discounts		Page 7, Line 22 Page 8, Line 4	***************************************	•	
5	Subscription Service Settlement	*************	Page 3.1, Line 13	***************************************	4,031,207	
6	Other (Attach Schedule)	*************	-	Sum of Lines 2 through 6		8,388,752
7	Total			Garriso E anought		
8	Net Revenue from Ambulance Runs			Line 1, minus Line 7		13,409,798
9	Sales of Subscription Service Contracts		Page 8, Line 8			
10	Total Operating Revenue			. Line 8, plus Line 9		\$ <u>13,409,798</u>
	Ambulance Operating Expenses:					
11 12 13 14 15 16	Bad Debt (Includes Subscription Services B Wages, Payroll Taxes, and Employee Bene General and Administrative Expenses Cost of Goods Sold	fits	Page 4, Line 22 Page 5, Line 20 Page 3, Line 15 Page 6, Line 28 Page 14. Line 28. C	olumn 4 & 5	3,125,122 15,267,893 2,398,125 728,904 1,347,053	
18	Total Operating Expense	*************		Sum of Lines 11 through 17		22,867,097
19	Ambulance Service Income (Loss)			Line 10, minus Line 18		(9,457,299)
20 21 22	Other Revenue / Expenses: Other Operating Revenue and Expense Non-Operating Revenue and Expense Non-Deductible Expenses (Attach Scheduf		Page 9, Line 17			
23	Total Other Revenues / Expenses			Sum of Lines 20 & 21	.,,	
24	Ambulance Service Income (Loss) - Be	fore Income Ta	xes	Sum of Line 19, plus Line 23		(9,457,299)
25 26	Provision for Income Taxes: Federal Income Tax State Income Tax					
27	Total Income Tax		***************************************	Lines 25, plus Line 26		••
28	Ambulance Service Net Income (Loss)		Line 24, minus Line 27		(9,457,299)

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AMBU	LANCE SERVICE ENT	ITY:			TUCSON FIR	E DEPARTME	NT		
FOR TH	HE PERIOD	F	ROM:	July 1, 2013	тс):Ju	ne 30, 2014		
ROUTII	NE OPERATING REVENUE								
Line <u>No.</u>	DESCRIPTION								
	Ambulance Service Rou	tine Operating	Revenue	:					
1	ALS Base Rate Amount	Rate Rate	\$	1,079.45 1,105.36 1,128.57	x No. of Runs x No. of Runs x No. of Runs		665 15,762 1,256	=	717,834 17,422,684 1,417,484
2	BLS Base Rate Amount	Rate Rate	_	_	x No. of Runs x No. of Runs			= =	-
3	Mileage Rate Amount	Rate Rate Rate Rate		9.32 9.45	x No. of Billable Mile	ssss	4,981 24 300	= = = =	44,249 1,161,689 96,133 224 2,835 135
4	Waiting Charge Amount	Rate Rate	_	9.65	x No. of Billable Mile x No. of Hours x No. of Hours	5	"	=	
5	Medical Supplies (Gross Char	ges to patients)	,,,,	,, .,, ,, ,					935,283
6	Nurses Charges		***		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
7	Total		<u></u>				,		21,798,550
8	Standby Revenue (Attach Sch	nedule)			.,				
9	Other Ambulance Service Reve	enue (Attach Sch	edule) .						<u>-</u>
10	Total Ambulance Service Rou	ıtine Operating R	levenue (To	Page 2, Line 1)				\$	21,798,550
	Cost of Goods Sold: (M					u 15 v 15 4144 PF			
11 12 13 14	Inventory at Beginning of Year Plus Purchases Plus Other Costs Less Inventory at End of Year								
15	Cost of Goods Sold (To Pag	ge 2, Line 14)						\$	728,904

MBU	ILANCE SERVICE ENT	TTY:			TUC	SON FIRE DEPAR	TME	NT
OR TH	HE PERIOD	FROM:	Jul	y 1, 2013		то:	-	June 30, 2014
OUTII	NE OPERATING REVENUE	Identified by subsidize	d and no	on-subsidized pation (1)	ents	(2)		(3)
Line <u>No.</u>	DESCRIPTION			SUBSIDIZED PATIENTS		NON- SUBSIDIZED <u>PATIENTS</u>		TOTALS
	AMBULANCE SERVICE OPERA	TING REVENUE						
1	ALS Base Rate		\$	_	\$	19,558,002	\$.	19,558,002
2	BLS Base Rate	******						-
3	Mileage Charge	***********		_		1,305,265		1,305,265
4	Waiting Charge	*****					-	
5	Medical Supplies	(Gross Charges)		_		935,283		935,283
6	Nurses' Charges	*****						
7	Total		\$		\$.	21,798,550	\$_	21,798,550
	Plus:	(40, 1, 5, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,						
8	Standby Revenue	•					-	
9	Other Ambulance Service Re	evenue (Attach Schedule) .					-	
10	Total Ambulance Service Ro	utine Operating Revenue	(Po	ost to Pg 2, Line 1)		\$.	21,798,550
	Less:							
11	AHCCCS Settlement	(Post total to Pg 2, Line 2)	\$		\$ _	1,573,473	\$ _	1,573,473
12	Medicare Settlement	(Post total to Pg 2, Line 3)	•		_	2,784,072	_	2,784,072
13	Subsidy	(Post total to Pg 2, Line 6)				N/A	_	
14	Other	(Attach Schedule)			-	4,031,207	-	4,031,207
15	Total Settlements	(Post to Pg 2, Line 7)	\$	-	\$	8,388,752	\$_	8,388,752

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Note: This page and page 1.1, are only for those governmental agencies that apply subsidy to patient billings.

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THE PERIOD	FROM:	July 1, 2013	TO:	June 30, 2014		
THE PERIOD	FROM.	July 1, 2013		Julie 30, 2014		
NEC DAVIDOLL TAX	/CC and EMDI	OVEE DENETITE				
SES, PAYROLL TA	KES, and EMPL	OYEE BENEFITS				
					No. of	
DESCR	<u>IPTION</u>				*F.T.E.	AMOUNT
OFFICERS / OWNER	•	(Attach Schedule 1, Wage Cat	egony Pa 10 Line 7)			
Gross Wages	•	(Allaci Scriedule 1, Wage Cal	* *		0.0	\$ -
Payroll Taxes		,,,				
Employee Fringe Bene	efits	***************************************				
Total				***********	0.0	
MANAGEMENT		(Attach Schedule II, Wage Det	ail· Po 11)			
Gross Wages		(titada oonedale ii, Trago ee			2.0	179,0
Payroll Taxes						2,
Employee Fringe Bene	efits					117,0
Total		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***************************************	2.0	299,2
			7. D	**!		
AMBULANCE PERSO Gross Wages	NNEL	(Attach Schedule II, Wage Det	ail; Pg ′ ** Casual Labor	Wages		
Paramedics and IEMT			\$ \$		126.0	7,994,
Emergency Medical To				2		
Nurses						
Payroll Taxes						113,1
Employee Fringe Bene	efits				126.0	5,383,1 13,491,1
Total		111 771 711 411 777 277 177 177 177 177 177 177 177 1			120.0	13,431,1
OTHER PERSONNEL		(Attach Schedule II, Wage Deta	ail; Pg 11)			
Gross Wages Dispatch		111 127 - 17 - 17 - 17 - 17 - 17 - 17 -			10.0	380,3
Mechanics					2.0	115,
Office and Clerical		***************************************	***		7.0	438,
Other			,			
Payroll Taxes						71,
Employee Fringe Bene	efits		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		19.0	470,6 1,476,5
Total		*** *** 1** //* *** / *** *** *** *** **	***************************************		13.0	1,470,
Total F.T.E., Wages,	Payroli Taxes, & I	Employee Benefits	(Post to Pg 2, line 12)		147.0	\$15,267,8
l-time equivalents (F.T.	E.) is the sum of a	Il hours for which employee wages	were paid during the year divide	d by 2,080.		

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AMB	ULANCE SERVICE ENTITY:			TUCSON FIRE DEP	ARTMENT		
OR 1	THE PERIOD FROM:	July 1, 201	3	то: _	June 30, 2014		
ALLO	CATION OF WAGES, PAYROLL	TAXES, and EMPL	OYEE BENEFITS				
Line <u>No.</u>	DESCRIPTION			(1) No. of *F.T.E.	(2) Total <u>Expenditure</u>	(3) Allocation <u>Percentage</u>	(4) Ambulance <u>Amount</u>
	MANAGEMENT						
1	Gross Wages	(Attach Schedule II)		2.0	179,025	100%	179,025
2	Payroll Taxes			_	2,596	100%	2,596
3	Employee Fringe Benefits				117,602	100%	117,602
4	Total			2.0	299,223		299,223
	AMBULANCE PERSONNEL		** Contractual Wages				
	Gross Wages	(Attach Schedule II)	Labor				
5	Paramedics and IEMT		\$	126.0	7,994,700	100%	7,994,700
6	Emergency Medical Technician (EMT)						•
7	Nurses						
8	Drivers						
9	Payroll Taxes				113,778	100%	113,778
10	Employee Fringe Benefits			_	5,383,224	100%	5,383,224
11	Total			126.0	13,491,702	-	13,491,702
	OTHER PERSONNEL						
	Gross Wages	(Attach Schedule II)					
12	Dispatch			10.0	380,360	100%	380,360
13	Mechanics			2.0	115,479	100%_	115,479
14	Office and Clerical			7.0	438,928	100%	438,928
15	Other						~
16	Payroll Taxes			_	71,503	100%_	71,503
17	Employee Fringe Benefits			_	470,698	100%	470,698
18	Total			19.0	1,476,968	_	1,476,968
19	TOTAL F.T.E., WAGES, PAYROLL TAXES & EMPLOYEE BENEFITS		(Post to Pg 2, line 12)	147.0	15,267,893	\$_	15,267,893

Full-time equivalents (F.T.E.) is the sum of all hours for which employee wages were paid during the year divided by 2,080.

The sum of Casual Labor (wages paid on a per run basis) plus Wages paid is entered in Column 2 by line item. However, when calculating F.T.E's, do not include casual labor hours worked or expenses incurred.

R THE PERIOD	FROM:	July 1, 2013	то:	June 30, 2014
IS OF ALLOCATIONS OF WAGES, PAYRO	LL et al.			
lne		<u>B</u>	asis of Allocatio	ons .
No. DESCRIPTION				
1 Gross Wages - MANAGEMENT			Estimate of time spe	nt
2 Payroll Taxes			Estimate of time spe	nt
3 Employee Fringe Benefits			Estimate of time spe	nt
4 Total				
		Contractual		Wages
Gross Wages - AMBULANCE PERSONNEL				
Paramedics and IEMT			Associ	ated with ambulance service
Emergency Medical Technician (EMT)				
Nurses				
B Drivers				
9 Payroll Taxes	M-4444000000000000000000000000000000000		Associ	ated with ambulance servic
0 Employee Fringe Benefits			Associ	ated with ambulance servic
1 Total				
Gross Wages - OTHER PERSONNEL				
2 Dispatch			Estimate of time spe	
3 Mechanics			Estimate of time sper	•
4 Office and Clerical		!	Estimate of time sper	nt
5 Other			- 4	
6 Payroll Taxes			Estimate of time sper	
7 Employee Fringe Benefits	····		Estimate of time sper	nt

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ЛB	ULANCE SERVICE ENTITY:	тис	SON FIRE DEP.	ARTMENT	
R 1	HE PERIOD	FROM: July 1, 2013	то:	June 30, 2014	
NE	RAL and ADMINISTRATIVE EXPENSES				
ine lo.	DESCRIPTION				
	Professional Service:				
I	Legal Fees		\$	-	
2	Collection Fees		Literatur	34,777	
}	Accounting and Auditing				
	Data Processing Fees			<u>-</u>	
	Other (Attach Schedule)	Medical director/admin. base hospital		276,306	
	Total		. ,		\$ 311,083
	Travel and Entertainment:				
	Meals and Entertainment				
	Transportation - Other Company Vehicles				
	Travel			1,707	
	Other (Attach Schedule)			-	
	Total			*******	 1,707
	Other General and Administrative:				
	Office Supplies			18,688	
i	Postage				
	Telephone			47,912	
	Advertising		**************************************	299	
	Professional Liability Insurance			<u>-</u>	
	Dues and Subscriptions		·	944	
	Other (Attach Schedule)	Fire admin., general government		2,017,492	
	Total			170.100	 2,085,335

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MI	BULANCE SERVICE ENTITY:		TUCSO	N FIRE DE	PARTMENT	· · · · · · · · · · · · · · · · · · ·	•
OR	THE PERIOD	FROM:	July 1, 2013	TO:	June 30, 2014		
LL	OCATION of GENERAL and ADMINI	STRATIVE EX	PENSES				
ine <u>No.</u>	DESCRIPTION				(1) Total <u>Expenditure</u>	(2) Allocation <u>Percentage</u>	(3) Ambulance <u>Amount</u>
	Professional Service:						
1	Legal Fees	************		\$	_	\$	
2	Colfection Fees				34,777	100%	34,777
3	Accounting and Auditing						-
4	Data Processing Fees	***************************************	*************				-
5	Other (Attach Schedule)	Medical directo	or, admin. base hospital		276,306	100%	276,306
6	Total	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	******	311,083		311,083
	Travel and Entertainment:						
7	Meals and Entertainment			_	<u>-</u>		-
8	Transportation - Other Company Vehicles						-
9	Travel				1,707	100%	1,707
10	Other (Attach Schedule)	• • • • • • • • • • • • • • • • • • • •	***************************************		ab.		
11	Total				1,707		1,707
	Other General and Administrative:						
2	Office Supplies				18,688	100%	18,688
3	Postage		••				-
4	Telephone	*****************	• • • • • • • • • • • • • • • • • • • •		47,912	100%	47,912
5	Advertising	,			299	100%	299
6	Professional Liability Insurance				_		-
7	Dues and Subscriptions				944_	100%	944
8	Other (Attach Schedule)	Fire admin., g	eneral government		2,017,492	100%	2,017,492
19	Total				2,085,335	,	2,085,335
	Total General and Administrative Exp	enses (Post					

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OR 1	THE PERIOD	FROM:	July 1, 2013	TO: Jun	e 30, 2014	
ASIS	of ALLOCATION OF GENER	RAL and ADMIN	ISTRATIVE EXPE	NSES .		
Line						
<u>No.</u>	DESCRIPTION			Basis of Allocat	ion	
	Professional Service:					
1	Legal Fees	**************************************			100.00	
2	Collection Fees			Associated solely with amb	ulance service	
3	Accounting and Auditing					
4	Data Processing Fees			Associated palahandth socia	ulanca convica	
5	Other (Attach Schedule)			Associated solely with amb	ulance service	
6	Total					
	Travel and Entertainment:					
7	Meals and Entertainment	-				
8	Transportation - Other Company Ve	ehicles		www.		
9	Travel			Associated solely with amb	ulance service	
10	Other (Attach Schedule)				4	
11	Total			A - Ali A A A - A - A - A - A - A - A - A - A		• .
	Other General and Adminis	trative:				
12	Office Supplies			Associated solely with amb	ulance service	
13	Postage	···				
14	Telephone			Associated solely with amb	ulance service	
15	Advertising					
	Professional Liability Insurance			Apposited palahaniah	ulanas santias	
16				Associated solely with amb	ulance service	
16 17 18	Dues and Subscriptions Other (Attach Schedule)			Associated solely with amb	ulance service	

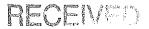
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AME	BULANCE SERVICE ENTITY:		TU	CSON FIRE D	EPARTMENT		
FOR	THE PERIOD	FROM:	July 1, 2013	TO:	June 30, 2014		
ЭТН	ER OPERATING EXPENSES						
Line <u>No.</u>	DESCRIPTION						
	Depreciation and Amortization:						
1 2	Depreciation (Attach Schedule III) Amortization		, Line 20, Col I)	\$	260,018		
3	Total			****************		\$	260,018
4	Rent / Lease (Attach Schedule III)	(From Pg 13,	, Line 20, Col K)				-
	Building / Station Expense:						
5 6 7 8 9	Building and Cleaning Supplies Utilities Property Taxes Property Insurance Repairs and Maintenance Other (Attach Schedule)		******	Acceptance of the second	83,593 125,447 - - 135,389		
11	Total					<u> </u>	344,429
	Vehicle Expense - Ambulance Units	s:					
12 13 14 15 16	License / Registration Fuel General Vehicle Service and Maintenance Major Repairs Insurance - Service Vehicles Other (Attach Schedule)	Radio service			7,353 180,224 139,490 - - 20,076		
18	Total				11412211441441		347,143
	Other Expenses:						
19 20 21 22 23 24 25 26	Dispatch Education / Training Uniforms and Uniform Cleaning Meals and Travel for Ambulance personnel Maintenance Contracts Minor Equipment - Not Capitalized Ambulance Supplies - Nonchargeable Other (Attach Schedule)		ment oversite		123,159 - - - 41,168 107,024 58,560 65,552		
27	Total						395,463
28	Total Other Operating Expenses		ost to Hage 2, Line 15)	(\$	1,347,053

IM	BULANCE SERVICE ENTITY:		TUCS	ON FIRE D	EPARTMENT		
OR	THE PERIOD	FROM:	July 1, 2013	то:	June 30, 2014		
<u>LL</u>	OCATION of OTHER OPERATING E	<u>XPENSES</u>					
Line <u>No.</u>	<u>DESCRIPTION</u>				(1) Total Expenditure	(2) Allocation <u>Percentage</u>	(3) Ambulance <u>Amount</u>
	Depreciation and Amortization:						
1 2	Depreciation (Attach Schedule III)		(From Pg 13, Line 20, Col I)	\$	260,018	100% \$	260,018
3	Total				260,018	_	260,018
4	Rent / Lease (Attach Schedule III)		(From Pg 13, Line 20, Col K)		 .	100%	w.
	Building / Station Expense:						
5 6	Building and Cleaning Supplies Utilities				83,593 125,447	100% 100%	83,593 125,447
7	Property Taxes	************			-		
8	Property Insurance	**********			405.000	4000/	405.000
9 10	Repairs and Maintenance Other (Attach Schedule)				135,389	100%	135,389
,,,	(mach derically			•			
11	Total	************	,		344,429	-	344,429
	Vehicle Expense - Ambulance Unit	s:					
12	License / Registration				7,353	100%	7,353
13	Fuel				180,224	100%	180,224
14	General Vehicle Service and Maintenance		•••		139,490	100%	139,490
15	Major Repairs		•••••		· · · · · · · · · · · · · · · · · · ·		
16	Insurance - Service Vehicles					4000/	
17	Other (Attach Schedule)	Radio serv	rices		20,076	100%	20,076
18	Total	************			347,143	-	347,143
	Other Expenses:						
19	Dispatch				<u>-</u>		
20	Education / Training	***********			123,159	100%	123,159
21	Uniforms and Uniform Cleaning				<u> </u>	100%	
22	Meals and Travel - Ambulance Personnel	******************	•••••				-
23	Maintenance Contracts				41,168	100%	41,168
	Minor Equipment - Not Capitalized		***************************************		107,024	100%	107,024
	Ambulance Supplies - Nonchargeable Other (Attach Schodule)		goment oversite		58,560 65,552	100%	58,560 65,552
	Other (Attach Schedule)	глэк мапа	gement oversite		65,552	100%	65,552
27	Total			-	395,463	-	395,463
28	Total Other Operating Expenses		(Post to Page 2, Line 15)		1,347,053	_	1,347,053

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AMB	ULANCE SERVICE ENTITY:			TUCSON FIRE DEF	PARTMENT	
FOR	THE PERIOD	FROM:	July 1, 2013	TO:	June 30, 2014	
BASIS	S of ALLOCATION OF OTHER EXPE	NSES				
						
Line	DESCRIPTION			Basis of A	Mocation	
<u>No.</u>	<u>DESCRIPTION</u>			<u> </u>	Anocation	
	Depreciation and Amortization:					
1	Depreciation	_		Associated solely w	vith ambulance service	
2	Amortization	_				
3	Total	<u>.</u>				
4	Rent / Lease	_		Associated solely w	vith ambulance service	
	Building / Station Expense:					
5	Building and Cleaning Supplies			Associated solely w	vith ambulance service	
6	Utilities	-			vith ambulance service	
7	Property Taxes	_		•		
8	Property Insurance	-				
9	Repairs and Maintenance	_		Associated solely w	vith ambulance service	
10	Other	_				
11	Total	_			M. A. Miller W. C.	A ACCOUNT OF THE PARTY OF THE P
	Vehicle Expense - Ambulance Uni	ts:				
40	•			Annaniahad anlah	dith ambudanaa aasidaa	
12 13	License / Registration Fuel	_			vith ambulance service vith ambulance service	
14	General Vehicle Service and Maintenance	_			vith ambulance service	
15	Major Repairs	-		/ tooodated solely to	THE CAMPAGE TOO SEE TOO	
16	Insurance - Service Vehicles	_				
17	Other	-		Associated solely w	vith ambulance service	
18	Total	_				
	Other Expenses:					
19	Dispatch					
20	Education / Training	-		Associated solely w	vith ambulance service	-
21	Uniforms and Uniform Cleaning	_			vith ambulance service	
22	Meals and Travel for Ambulance personnel					
23	Maintenance Contracts	_		Associated solely w	vith ambulance service	
24	Minor Equipment - Not Capitalized				vith ambulance service	
25	Ambulance Supplies - Nonchargeable	_			/ith ambulance service	
26	Other (Attach Schedule)	_		Associated solely w	vith ambulance service	
27	Total	_				

Page 6.1.a



MIBULAI	NCE SERVICE ENTITY:		TU	CSON FIRE	DEPARTMENT		····
OR THE P	ERIOD	FROM:	July 1, 2013	то:	June 30, 2014		
ETAIL OF	CONTRACTUAL ALLOWANCES						
Line <u>No.</u>	Name of Contracting Entity		Total Billable <u>Runs</u>		Gross <u>Billing</u>	Percent <u>Discount</u>	Allowance
1	NOT APPLICABLE						-
	L. C.						
3							-
4							•
5							-
6							-
7					33333		-
8							**
9 —							
10							
11							
12							
13							
14					*		-
15							
16							-
17							
18							-
19							
20							
21				_			

Page 7

RECEIVED

? Т	HE PERIOD	FROM:	July 1, 2013	TO:	June 30, 2014	
BS	CRIPTION SERVICE REVENUE AND	-	ody 1, 2010	• • • • • • • • • • • • • • • • • • • •	<u></u>	
1e <u>D.</u>	<u>Description</u>					
l	Billings at Fully Established Rate	NOT AP	PLICABLE			\$
	Less:					
2	AHCCCS Settlement			\$		
3	Medicare Settlement			· —		
4	Subscription Service Settlement					
5	Subscription Service Bad Debt					
6	Total					 •
	Plus:					
7	Net Revenue from Subscription Service Runs				*** *** *** *** ***	-
B	Sales of Subscription Service					
9	Other Revenue					
0	Total Subscription Service Revenue	(tot	al of Lines 7, 8 and	9)		
	Direct Expenses Incurred Selling Subscription	Contracts				
1	Salaries / Wages		******			
2	Payroll Taxes	.,.,.,.,,	***************************************			
3	Employee Fringe Benefits					
4	Professional Services					
5	Contract Labor					
6	Travel					
7	Other General & Administrative Expenses					
8	Depreciation / Amortization					
9	Rent / Lease					
	Building / Station Expense			_		
:0						
0	Transportation / Vehicles					

Page 8



AMB	ULANCE SERVICE ENTIT	Y:	7	TUCSON FIRE DEPARTM	ENT	- 1 d or
OR T	HE PERIOD		FROM:	July 1, 2013	TO:	June 30, 2014
OTHE	R OPERATING REVENUES &	EXPENSES				
Line						
No.	<u>Description</u>					
	Other Operating Re	venues:				
1	Supportive Funding - Local	(attach schedule)		\$		
2	Grant Funds - State	(attach schedule)				
3	Grant Funds - Federal	(attach schedule)		-		
4	Grant Funds - Other	(attach schedule)				
5	Patient Finance Charges					
6	Patient Late Payment Charges .					
7	Interest Earned - Related Person / C	Organization				
8	Interest Earned - Other					
9	Gain on Sale of Operating Property	***************************************				
10	Other:					
11	Other:			<u> </u>		
12	Total Other Operating Revenues		• • • • • • • • • • • • • • • • • • • •		\$	-
	Other Operating Expenses:					
13	Loss on Sale of Operating Property	********************************	***********			
14	Other:					
15	4					
16	Total Other Operating Expenses					-
17	Net Other Operating Revenues and	Expenses (Post	to Pg 2, Line 20) .	.,,	\$	**

June 30, 2014

July 1, 2013

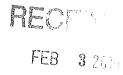
FROM

FOR THE PERIOD

AMBULANCE SERVICE ENTITY:

TUCSON FIRE DEPARTMENT
TO: 14

	*FTE	0.0 Post Total to Pg 4, Column 1, Line 1	Astranos estados estad
	WAGES PAID TO OWNERS	Post Total Dog 4, Column 2, Line 1	
	<u> </u>	y 0:0	
	<u>OTHER</u>		
	¥TE		
	OFFICE		
	114 - t	, в в в в в в в в в в в в в в в в в в в	
	CEP IEMT EMT		Page 10
	11	000	
	Management	s s	
	% of Ownership	0% (
	Title	all hours for which employee wages	T T T T T T T T T T T T T T T T T T T
Schedule I DETAIL OF SALARIES / WAGES <u>Officers / Owners</u>	Name	NOT APPLICABLE TOTAL TOTAL Full-time equivalents (F.T.E.) is the sum of all hours for which employee wages were paid during the year divided by 2080	
DET	Line No.	- 4 0 4 2 0 V	



BEMSTS/01

BUI	ANCE SERVICE ENTITY:		TUCSON FIRE DEF	PARTMENT	
t TH	E PERIOD	FROM: July 1,	2013 TO: _	June 30, 2014	
<u> </u>	Schedu DETAIL of SALAR Nanagement, Ambulance Per	IES / WAGES			
	Detail of Salaries / Wages - 0	Other Than Officers / Owners	i.		
	MANAGEMENT:				
	Certification and / or Title	Scheduled Shifts (no. of hours worked each	Hourly week) Wage	Annual Salary	\$ Per Rur or Shift
	Fire Deputy Chief Fire Captain: 8-hour assignment	40 hours/week 40 hours/week		X	WW. 25
					41000
	AMBULANCE PERSONNEL: Paramedic	56 hours/week	X		
				Laboration -	
	OTHER PERSONNEL:				
	Public Safety Dispatcher	40 hours/week			
	Sr. Heavy Equipment Mechanic	40 hours/week			
	Ambulance Billing Staff	40 hours/week	X		
	IT Support	40 hours/week	X		

Page 11



4.113.510 96.397 56.880 Fost to Pg 13. Line 20 Column t K Rent / Lease Amounts . J Remaining Basis 56,880 l Current Year Depreciation 96,397 444,723 395,980 328,753 164,498 347.664 302,304 342,982 367,572 H Depreciation Prior Years 81,320 935,023 392,511 G Recovery Period (in years) 0 F Method "straight line" AMBULANCE REVENUE AND COST REPORT Ϋ́ 징 찡 낑 징 S 엉 임 징 정정 June 30, 2014 302,304 444,723 395,980 347,664 E Basis for Depreciation 10,180 935,023 482,030 164,498 342,982 367,572 81,320 4,266,787 ë D Business Use Percent 100% 100% 100% 100% 100% 100% 100% 100% 100% 100% TUCSON FIRE DEPARTMENT 392,511 302,304 444,723 395,980 482.030 164.498 347,664 342,982 367,572 81,320 935,023 10,180 Cost or Other Basis July 1, 2013 B Date Placed in Service 1/31/2010 FY 2005 FY 2007 FY 2009 FY 2011 FY 2008 FY 2006 FY 2011 FY 2011 DEPRECIATION and/or RENT / LEASE EXPENSE AMBULANCE VEHICLES & ACCESSORIAL EQUIPMENT ONLY FY 1998 FY 2011 FY 2011 Complete Description of property, date placed in service, and rent/lease amount only. FROM: 2001 MINI MEDIC AMBULANCE (2) Contributed Lease/purchase cardiac monitors (41)-complete Schedule III 2003 PARAMEDIC VEHICLE (4) Contributed PARAMEDIC VEHICLE (4) Contributed AMBULANCE SERVICE ENTITY: A Description of Property PARAMEDIC VEHICLE Contributed 2003 AMBULANCE (4) Contributed SUBTOTAL 2009 Medtec Type 1 AD170 (2) Medtec Ambulance AD179 (2) (1 F-30 Ambulance (4) Ambulance (4) Cardiac Monitor Ambulance (4) FOR THE PERIOD 12 5 17 4 8 No. 9 5 16

Page 12

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BEMSTS/00% of WALES

			⋖	AMBULANCE RE'	VENUE AN	ANCE REVENUE AND COST REPORT	PORT				
AMB	AMBULANCE SERVICE ENTITY:		TUCSON FIR	TUCSON FIRE DEPARTMENT	1						
FOR.	FOR THE PERIOD FROM:_	Vi: July 1, 2013	Ö	June 30, 2014							
DEPR	Schedule III DEPRECIATION and/or RENT / LEASE EXPENSE ALL OTHER ITEMS										
Line No.	A Description of Property	B Date Placed in Service	Cost or Other Basis	D Business Use Percent	E Basis for Depreciation	F Method "straight line" Depreciation	G Recovery Period (in years)	H Depreciation Prior Years	L Current Year Depreciation	J Remaining Basis	K Rent / Lease Amounts *
-	Fire Station #1 HQ	31-May-10	36,649,649	3%	1,099,489	SI	39	84,579	28,192	986,718	•
2	Fire Station #3	1-Jan-73	439,218	35%	153,726	SL	39	149,786	3,940	1	
က	Fire Station #4	1-May-97	1,058,739	35%	370,559	SL	39	142,526	8,502	218,531	
4	Fire Station #5	1-Jun-84	569,910	35%	199,469	SL	39	148,335	5,115	46,019	
ω	Fire Station #7	1-Feb-88	697,388	35%	244,086	"S	39	143,957	6,259	93,870	•
ω	Fire Station #8	1-Jan-73	282,398	35%	98,839	SL	39	15,204	2,534	81,101	-
7	Fire Station #9	1-Jun-70	481,187	35%	168,415	Si	39	168,415		-	•
80	Fire Station #10	1-Jun-70	103,800	35%	36,330	SE	39	36,330	_		•
တ	Fire Station #11	30-Jun-70	667,102	35%	233,486	Si.	39	35,922	5,987	191,577	*
2	Fire Station #12	1-Mar-78	163,269	35%	57,144	75	39	8,790	1,465	46,889	
7	Fire Station #13	1-Apr-75	139,815	35%	48,935	SL	39	45,180	1,255	2,500	•
72	Fire Station #14	1-Jun-69	73,749	35%	25,812	SL	39	25,812	ţ	•	•
13	Fire Station #15	1-Dec-75	243,322	35%	85,163	S	36	21,840	2,184	61,139	•
4	Fire Station #16	1-Dec-76	475,386	35%	166,385	SI	39	149,310	4,266	12,809	*
15	Fire Station #19	1-Nov-98	1,022,421	35%	357,847	"SI"	39	137,640	9,176	211,031	
5	Fire Station #22		4,742,196	35%	1,659,769	S	39	334,806	42,558	1,282,405	
18	SUPPLY WAREHOUSE & VEHICLE MAINTENANCE FACI	4Cl 31-Oct-09	4,589,499	35%	1,606,325	N.	39	119,838	41,188	1,445,299	
4	Supply ATOTOLS		00000		1500				700		
2 6	SUBIOIAL above	***************************************	52,399,048		6,611,779			1,768,270	163,621	4,679,888	_
707	SUBTOTAL from Page 12, Line 20		 - -		the same of their is other or				96,397 Post from Pg 12, Line 20 Column I	26,880	Post from Pg 12, Line 20 Column K
21	SUM of Line 19 & 20						1	I	260,018	4,736,768	
Con	 Complete Description of property, date placed in service, and rentlease amount only. 	tflease amount only.							Post to Pg 6, Line 1		Post to Pg 6, Line 4

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FEB 3 2015

BEMSTS/CON & SALE

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			AM	AMBULANCE REVENUE AND COST REPORT	ENUEAND	COSTRE	PORT				
AMB	AMBULANCE SERVICE ENTITY:		TUCSON FIRE DEPA	E DEPARTMENT							
FOR	FOR THE PERIOD FROM:_	M: July 1, 2012	ö	June 30, 2013							
DEPR	Schedule III DEPRECIATION and/or RENT/LEASE EXPENSE ALL OTHER ITEMS										
	A	m i	o į	۵	ш.	L. :	o	I	- ,	7	¥
Š.	Property Property	Date Placed in Service	Cost or Other Basis	Business Use Percent	Basis for Depreciation	Method "straight line" Depreciation	Recovery Period (in years)	Depreciation Prior Years	Current Year Depreciation	Remaining Basis	Rent / Lease Amounts *
ν	Fire Station #1 HQ	31-May-10	36,651,132	3%	1,099,534	SL	36	56,386	28,193	1,014,955	-
7	Fire Station #3	1-Jan-73	439,218	35%	153,726	SL	39	145,844	3,942	3,940	,
ю	Fire Station #4	1-May-97	1.058,739	35%	370,559	SL	39	133,024	9,502	228,033	,
4	Fire Station #5	1-Jun-84	569,910	35%	199,468	SL	39	143.220	5,115	51,133	+
c,	Fire Station #7	1-Feb-88	697,388	35%	244,086	SL	39	137,698	6,259	100,129	ì
g	Fire Station #9	1-Jun-70	481,187	35%	168,415	SL	39	168,415	•		,
7	Fire Station #10	1-Jun-70	103,800	35%	36,330	SL	39	36,330			
8	Fire Station #13	1-Apr-75	139,815	35%	48,935	SL	39	43,925	1,255	3.755	,
တ	Fire Station #14	1-Jun-69	73,749	35%	25.812	SL	39	25,812	•	-	•
9	Fire Station #16	1-Dec-76	475,386	35%	166,385	SI	39	145,044	4,266	47,075	•
Ξ	Fire Station #19	1-Nov-98	1,022,421	35%	357,847	SL	39	128,464	9,176	220,207	*
12	Fire Station #15	1-Dec-75	243,322	35%	85,163	SL	39	19,656	2,184	63,323	
55	Fire Station #20	1-Apr-05	2,028,604	35%	710,011	SL	39	127,435	18,205	564,371	
14	Fire Station #21	1-Apr-05	2,378,690	35%	832,541	SI	39	128,082	21.347	683,112	
5	Fire Station #8	1-Jan-73	282,398	35%	68'836	SI.	39	12,670	2,534	83,635	
9	Fire Station #11	30-Jun-70	667,102	35%	233,486	Si	39	29,935	5,987	197,564	
7 0	Fire Station #12	1-Mar-78	163.269	35%	57.144	SI	8	7,325	1,465	48,354	
<u>o</u>	Jrue Station #22	1 /0-8ny-c> 1	1 68/1/12'0	35%	2,176,226		36	1 279,005	55,801	1,841,420	- Landerson Control of the Control o
6	SUBTOTALiabove		53,693,919		7.064,507			1,768,270	175231	5,121,006	
20	SUBTOTAL from Page 12, Line 20								765/36	56,880	
									Post from Pg 12, Line 20		Post from Pg 12, Line 20 Column K
21	SUM of Line 19 & 20	 	# # # # # # # # # # # # # # # # # # #		!				271628	5,177,886	
- Com	 Complete Description of property, date placed in service, and rent/lease amount only, 	Vease amount only.							Post to Pg 6, Line 1		Post to Pg 6 Line 4

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BEMSTS/CON & RATES

AMBULANCE REVENUE AND COST REPORT AMBULANCE SERVICE ENTITY: TUCSON FIRE DEPARTMENT FOR THE PERIOD FROM: July 1, 2013 June 30, 2014 Schedule IV **DETAIL OF INTEREST** (1) (2) (3) (4) (5) Principal Balance Interest Expense Related Persons or Line Interest Beginning of <u>No.</u> Description <u>Period</u> Period Organizations <u>Other</u> <u>Rate</u> Service Vehicles & Accessorial Equipment **NOT APPLICABLE** 1 2 3 Communication Equipment Name of Payee: 5 6 Other Property and Equipment Name of Payee; 8 9 10 Working Capital Name of Payee: 11 12 13 Other Name of Payee: 14 15 TOTAL Post totals of Column 4 & 5 to Pg 2, Line 16

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AN	IBULANCE SERVICE ENT	TITY:		TUCSON FIRE DEF	ARTMENT	
FOI	R THE PERIOD	FROM:	July 1, 2013	то:	June 30, 2014	
BAI	ANCE SHEET					
	ASSETS					
1	CURRENT ASSETS Cash			\$	-	
2 3 4 5	Accounts Receivable Less: Allowance for Doubtful A Inventory Prepaid Expenses	ccounts			10,870,661 8,788,224	
6 7	Other Current Assets TOTAL CURRENT ASSETS	***************************************				\$ 2,082,437
9 10	PROPERTY & EQUIPMENT Less: Accumulated Depreciation	n				11,030,253 6,141,807
11	OTHER NON CURRENT ASSETS					
12	TOTAL ASSETS					\$6,970,883_
L	LIABILITIES & EQUITY					
13 14 15 16 17 18 19	CURRENT LIABILITIES Accounts Payable Current Portion of Notes Payable Current Portion of Long-Term De Deferred Subscription Income Accrued Expenses and Other	bt		\$	1,090,888	
20	TOTAL CURRENT LIABILITIES					\$1,117,544_
22	NOTES PAYABLE LONG-TERM DEBT OTHER TOTAL LONG-TERM DEBT	******				-
24 25 26 27 28	EQUITY & OTHER CREDITS Paid-In Capital: Common Stock Paid-In Capital in Excess of Par V Contributed Capital Retained Earnings			mounted and	11,030,253	
29 30	Fund Balance				(5,176,914)	
	TOTAL EQUITY		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Accordance and the second accordance accordance and the second accordance and the second accordance and the second accordance accordance and the second accordance and the second accordance accordance and the second accordance accordance accordance accordance accordance and the second accordance accord	(0),110(0111)	5,853,339
32	TOTAL LIABILITIES & EQUITY					\$6,970,883 *****

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AMBULANCE SERVICE ENTITY:			TUCSON FIRE DEPARTMENT			
FOR THE PERIOD FROM:		July 1, 2013	TO:	June 30, 2014		
ST.	ATEMENT OF CASH FLOWS					
	OPERATING ACTIVITIES:					
1	Net (loss) Income	,.,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$	(9,457,299.00)	
	Adjustments to Reconcile Net Inc	come to Net	Cash			
2	Provided by Operating Activities:	•	Note: a increase in these accounts	improves cash flow	260 249 20	
2 3	Depreciation Expense Deferred Income Tax		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	260,018.00	
4			uipment			
	(Increase) Decrease in:		Note: a increase in these accounts	improves cash flow		
5	Accounts Receivable			improvoo saariinon	1,501,278.00	
6	Inventories				.,,	
7	Prepaid Expenses					
	(Increase) Decrease in:		Note: a increase in these accounts	improves cash flow		
8	Accounts Payable				(18,661.00)	
9	Accrued Expenses				708,341.00	
10	Deferred Subscription Incom	ie				
11	NET CASH PROVIDED (Used) E	BY OPERATI	NG ACTIVITIES			\$(7,006,323.00)
	INVESTING ACTIVITIES:					
12	Purchases of Property & Equipm					
13	Proceeds from Disposal of Prope	erty & Equipm			······································	
14	Purchases of Investments		•••••••	-		
15 16	Proceeds from Disposal of Invest Loans Made	imenis	•••••••••••••••••			
17	Collections on Loans		***************************************			
18	Other (transfer from COT General	al Fund)			7,006,323.00	
19	•	,	IG ACTIVITIES		· ·	\$ 7,006,323.00
	FINANCING ACTIVITIES:					
20	<u>New Borrowings:</u> Long-Term					
21	Short-Term		.,,.	***************************************		
	5			<u> </u>	· · ·	
	Debt Reduction:					
22	Long-Term	*************				
23	Short-Term	****************		and the second s		
24	Capital Contributions					
25	Dividends Paid			\$		
26	NET CASH PROVIDED (Used) B	BY FINANCIN	IG ACTIVITIES			\$ -
27	NET INCREASE (Decrease) IN C					\$ -
28	CASH AT BEGINNING OF YEAR		***************************************			\$ -
29	CASH AT END OF YEAR					\$ -
	SUPPLEMENTAL DISCLOSURE	zę.				
	Non-cash Investing and Financing		<u>98:</u>			
30						
31						
32		nitalized)				
33 34	• • • • • • • • • • • • • • • • • • • •	pitalize(I)				<u> </u>
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